

Effectiveness of Counter-Fraud Arrangements – **Public Health Wales** **NHS Trust**

Audit year: 2020

Date issued: September 2020

Document reference: 2015A2020-21

The Auditor General has a wide range of audit and related functions, including auditing the accounts of Welsh NHS bodies, and reporting to the Senedd on the economy, efficiency and effectiveness with which those organisations have used their resources. The Auditor General undertakes his work using staff and other resources provided by the Wales Audit Office, which is a statutory board established for that purpose and to monitor and advise the Auditor General.

Audit Wales is the non-statutory collective name for the Auditor General for Wales and the Wales Audit Office, which are separate legal entities each with their own legal functions as described above. Audit Wales is not a legal entity and itself does not have any functions.

© Auditor General for Wales 2020

No liability is accepted by the Auditor General or staff of the Wales Audit Office in relation to any member, director, officer or other employee in their individual capacity, or to any third party, in respect of this report.

This document has been prepared as part of work performed in accordance with statutory functions.

In the event of receiving a request for information to which this document may be relevant, attention is drawn to the Code of Practice issued under section 45 of the Freedom of Information Act 2000. The section 45 code sets out the practice in the handling of requests that is expected of public authorities, including consultation with relevant third parties. In relation to this document, the Auditor General for Wales and Audit Wales are relevant third parties. Any enquiries regarding disclosure or re-use of this document should be sent to Audit Wales at infoofficer@audit.wales.

We welcome correspondence and telephone calls in Welsh and English. Corresponding in Welsh will not lead to delay. Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg. Ni fydd gohebu yn Gymraeg yn arwain at oedi.

Mae'r ddogfen hon hefyd ar gael yn Gymraeg. This document is also available in Welsh.

Contents

The Trust demonstrates a commitment to counter-fraud, has suitable arrangements to support the prevention and detection of fraud and is able to respond appropriately where fraud occurs.

Summary report

Background 4

Main findings and areas for improvement 5

Detailed report

Our findings 6

Appendices

Appendix 1 – Counter-fraud resources 13

Appendix 2 – Management response 14

Summary report

Background

- 1 On 11 June 2019, the Auditor General published **Counter-Fraud Arrangements in the Welsh Public Sector: An Overview for the Public Accounts Committee**. The report was a high-level, descriptive review of the arrangements in place within the Welsh Government, the NHS and local government (unitary authorities only), and highlighted some important messages:
 - losses caused by fraud in the public sector are significant. In a time of austerity, every pound lost to fraud is a pound that could be spent on public services.
 - fraud in all its forms is constantly evolving, so counter-fraud measures need to keep pace with the fraudsters.
 - resources devoted to counter-fraud activity vary widely across the public sector in Wales.
- 2 Following publication of the report, the Public Accounts Committee endorsed the Auditor General's proposal to undertake further work across a range of Welsh public sector bodies to examine how effective counter-fraud arrangements are in practice and to make recommendations for improvement. This work was undertaken during December 2019 – February 2020.
- 3 On 30 July 2020, the Auditor General published a national report called **Raising our game – Tackling Fraud in Wales** which summarises the key finding from our review across Wales. It does not describe in detail the arrangements in place in individual bodies, but it identifies a range of opportunities to improve counter-fraud arrangements across Wales.
- 4 Whilst the national report identified that NHS counter-fraud arrangements are the most developed across the public sector, it identified that there is still a challenging agenda to make counter-fraud fit for the next decade where globalisation and the advent of digital technology have created new risks, and opportunities for the fraudsters.
- 5 The report calls on NHS bodies to satisfy themselves that:
 - counter-fraud resources are determined based on an assessment of local risk factors;
 - counter-fraud risk assessments are integrated with corporate risk management arrangements;
 - strategies are in place to make greater use of data analytics to both prevent and detect fraud; and
 - strategies are in place to improve collaboration within the sector and more widely across sector boundaries.
- 6 This summary report sets out our assessment of Public Health Wales NHS Trust's (the Trust's) arrangements for preventing and detecting fraud. Our assessment is

based on document reviews, including board and committee papers, and interviews with a small number of staff.

Main findings and areas for improvement

- 7 Our assessment identified that the Trust demonstrates a commitment to counter-fraud, has suitable arrangements to support the prevention and detection of fraud and is able to respond appropriately where fraud occurs. Our key findings from the work are set out in more detail in the following section of this report.
- 8 In undertaking this work, we identified some areas for improvement (**Exhibit 1**); they should be considered alongside the themes identified in the national report. The Trust’s management response to the areas for improvement is available in **Appendix 2**.

Exhibit 1: areas for improvement

Areas for improvement	
Counter-fraud training	
I1	Implement mandatory counter-fraud training for some or all staff groups.
Counter-fraud staff capacity	
I2	Consider the Local Counter-Fraud Specialist capacity required to resource required levels of proactive and investigative work, including staff training, and build in resilience to the team.
Clarity of counter-fraud roles and responsibilities	
I3	Ensure that the Counter-Fraud, Bribery and Corruption Policy sets out counter-fraud roles and responsibilities and the processes and arrangements for undertaking investigations.
I4	Ensure that the Counter-Fraud Response Plan provides clarity on the investigative process.

Exhibit source: Audit Wales

Detailed report

Our findings

9 The following table sets out the areas of focus within our work and our findings.

Exhibit 2: areas of work and findings

Areas of work	Findings
<p>We considered whether the top tier demonstrates a commitment to counter-fraud and provides the necessary leadership to fight fraud.</p> <p>We expected to see:</p> <ul style="list-style-type: none">the Board/Executive team promoting a clear commitment to zero tolerance of fraud and championing counter-fraud work;senior leadership actively promoting and cascading an anti-fraud culture;an organisation-wide understanding of responsibilities for preventing fraud and reporting suspected fraud; andan organisational commitment to counter-fraud and ethics awareness training, with appropriate and targeted mandatory counter-fraud training for all staff.	<p>We found the following good practice:</p> <ul style="list-style-type: none">the Executive Director of Finance is the Board executive responsible for counter-fraud.counter-fraud is a standing item on the Audit Committee agenda.all fraud related issues are treated as a priority by the organisation, and there is a clear commitment from the Executive Director of Finance and the Chair of the Audit Committee.policies and strategies send out a consistent message that fraud will not be tolerated, and that all steps will be taken to take criminal or disciplinary sanctions against perpetrators. The Trust ensures that there are effective lines of communication between those responsible for counter-fraud, bribery and corruption work and other key staff groups and managers within the organisation.the Trust publicises proven frauds and the action taken. <p>We identified the following areas for improvement:</p>

Areas of work	Findings
	<ul style="list-style-type: none"> the Trust has an ongoing programme of counter-fraud awareness training but attendance is not mandatory. However, fraud awareness training is provided as part of induction training.
<p>We considered whether the organisation has a suitable structure and sufficient skilled resources to prevent and detect fraud.</p> <p>We expected to see:</p> <ul style="list-style-type: none"> a designated Local Counter-Fraud Specialist (LCFS) with designated responsibility for counter-fraud and the ability to influence the level of counter-fraud resources; an appropriate level of experienced, trained and accredited counter-fraud staff to undertake investigations and counter-fraud work; clarity in respect of counter-fraud roles, responsibilities and lines of accountability; investment in counter-fraud based on informed decisions derived from a fraud risk assessment which highlights risks and determines the resources needed to address them; and an annual programme of proactive counter-fraud work (fraud prevention work) which covers the 	<p>We found the following good practice:</p> <ul style="list-style-type: none"> the Trust has a dedicated LCFS, with the ability to influence the level of counter-fraud resources designated by the Executive Director of Finance. the LCFS is also the dedicated lead for three other health bodies. the Trust employs accredited and trained counter-fraud staff, who attend training and professional development courses as required. the level of counter-fraud resources within the Trust is just below the average for Wales (Appendix 1). The whole-time equivalent (WTE) of local counter-fraud resources per 1,000 staff is 0.16 WTE compared to the average for NHS Wales of 0.19 WTE. the LCFS and counter-fraud staff have access to all systems, records and premises required to do their work. the LCFS completes the NHS Counter-Fraud Authority Self-Review Tool (SRT) on an annual basis. Where issues (risks) are identified, they are incorporated into the counter-fraud work plan, together with any issues/risks identified through general counter-fraud work. The SRT identifies proactive work priorities for the year.

Areas of work	Findings
<p>risks identified in the risk assessment with ring fenced time allocated to proactive work.</p>	<ul style="list-style-type: none"> • the number of days allocated to proactive and reactive counter-fraud work is broadly based on previous years but is flexible and can adapt to demands as cases arise. <p>We identified the following areas for improvement:</p> <ul style="list-style-type: none"> • the counter-fraud policy did not contain details of staff roles and responsibilities in relation to fraud. • staffing levels are just 0.3 WTE. If the level of investigative work increased, or if any member of staff were to be absent, this could impact on the ability to deliver the agreed level of proactive counter-fraud work.
<p>We considered whether the organisation has a sound policy framework to support effective counter-fraud arrangements.</p> <p>We expected to see:</p> <ul style="list-style-type: none"> • a counter-fraud strategy/policy which sets out the organisation’s approach to managing fraud risks and defines specific counter-fraud responsibilities; • a Code of Conduct setting out acceptable behaviours and how to report and manage conflicts of interest; • sound whistleblowing arrangements which set out mechanisms for reporting fraud; • maintained registers of gifts and hospitalities; and 	<p>We found the following good practice:</p> <ul style="list-style-type: none"> • the Trust has a current anti-fraud, bribery and corruption policy (the policy). The policy includes the counter-fraud response plan; • the policy was scrutinised and signed off by the Trust’s LCFS, management and Audit Committee; • staff awareness of the policy is raised in counter-fraud awareness sessions; • the Trust has an appropriate Code of Conduct, and whistleblowing and cyber security policies with review and renewal processes in place; • the Trust has appropriate arrangements to maintain and review registers of interests, gifts and hospitality; and • the Trust has arrangements in place to ensure that all new staff are subject to the pre-employment checks before commencing employment within the organisation.

Areas of work	Findings
<ul style="list-style-type: none"> pre-employment screening. 	<p>We did not identify any areas for improvement.</p>
<p>We considered whether the organisation has an effective fraud risk assessment together with appropriate responses to emerging issues.</p> <p>We expected to see:</p> <ul style="list-style-type: none"> regular and comprehensive fraud risk assessments discussed and agreed with senior leaders and the Audit Committee; fraud risk assessments featuring as part of the organisation's overall risk management framework; and fraud risk built into system design to minimise opportunities for fraud. 	<p>We found the following good practice:</p> <ul style="list-style-type: none"> the Trust completes the NHS Counter-Fraud Authority's SRT on an annual basis. annual work plans are based upon intelligence received and identified, a review of ongoing cases, referrals and proactive work priorities identified across Wales. Counter-fraud resource levels are proportionate to the risk level identified. Measures to mitigate identified risks are included in the workplan, which is approved by the Audit Committee. policies and paper-based procedures are fraud proofed using guidance issued by the NHS Counter-Fraud Authority. The LCFS reviews policies and proposes changes where it is deemed necessary. fraud risks feature as part of the organisations' overall risk management arrangements. <p>We did not identify any areas for improvement.</p>
<p>We considered whether the organisation's internal control environment supports effective arrangements for preventing and detecting fraud.</p> <p>We expected to see:</p>	<p>We found the following good practice:</p> <ul style="list-style-type: none"> the Trust's Internal Audit team reviews fraud risks and tests controls designed to prevent and detect fraud as part of its annual programme of work. Information and intelligence are shared with local counter-fraud services in line with the agreed information sharing protocol.

Areas of work	Findings
<ul style="list-style-type: none"> • internal controls designed and tested to address identified fraud risks and help prevent fraud occurring; • internal audit reviews of fraud risks and testing of controls designed to prevent and detect fraud; • the organisation acting on recommendations to strengthen controls if internal controls are found to be not operating as well as intended and lessons learned from fraud incidents; and • the organisation uses data matching to validate data and detect potentially fraudulent activity. 	<ul style="list-style-type: none"> • the Trust acts upon recommendations to strengthen controls if internal controls are found to be not operating as well as intended and learns lessons from fraud incidents. • the Trust participates in the National Fraud Initiative data matching exercise, and other local checks (such as payroll). • the Trust uses case management software to record all system weaknesses as identified as a result of investigations and/or proactive prevention and detection exercises. An important aspect of this software is recording lessons learned. <p>We identified the following area for improvement:</p> <ul style="list-style-type: none"> • our national review identified only a few examples of data analytics being used as a means of preventing fraud, predominantly the National Fraud Initiative data matching exercise.
<p>We considered whether the organisation has an appropriate response to fraud. We expected to see:</p> <ul style="list-style-type: none"> • a comprehensive fraud response plan which sets out clear arrangements for reporting and investigating allegations of fraud. • action to ensure that all allegations of fraud are assessed. Documented procedures for conducting fraud investigations which follow 	<p>We found the following good practice:</p> <ul style="list-style-type: none"> • the Trust's Fraud Response Plan follows best practice as advised by the NHS Counter-Fraud Authority. • qualified staff investigate all cases of suspected fraud. Outcomes of investigations are reported to the Audit Committee and to the NHS Counter-Fraud Authority. • the Trust utilises the full range of sanctions available (staff disciplinary action, civil action and criminal action) and seeks to recover monies where appropriate and cost effective to do so.

Areas of work	Findings
<p>proper professional practice and in line with the fraud response plan.</p> <ul style="list-style-type: none"> • investigations which follow proper professional practice and in line with the fraud response plan. • consideration of the full range of sanctions available, and redress sought (for example, the recovery of money and assets) where appropriate. • an appropriate case management system to record and monitor the progress of potential fraud cases. • collaboration with external partners to tackle fraud. 	<ul style="list-style-type: none"> • all investigations are documented on case management software. Learning from fraud is shared with appropriate staff to action and implement changes to systems and procedures where appropriate. • the Trust liaises proactively and on a regular basis with other organisations and agencies such as NHS Legal and Risk Services, the police, Home Office Immigration Services, local authorities, and regulatory and professional bodies to assist in countering fraud, bribery and corruption. Specialist services can be purchased from the NHS Counter-Fraud Authority where necessary. <p>We identified the following areas for improvement:</p> <ul style="list-style-type: none"> • the Counter-Fraud Response Plan does not set out the investigation process.
<p>We considered whether the organisation has proper reporting and scrutiny in place to ensure its counter-fraud culture and framework are operating effectively. We expected to see:</p> <ul style="list-style-type: none"> • a record kept of fraud losses and recoveries; • the Audit Committee taking a proactive approach to prevent fraud and promote an effective anti-fraud culture; and 	<p>We found the following good practice:</p> <ul style="list-style-type: none"> • the Trust maintains a record of fraud losses and recoveries; • counter-fraud is a standing item on the Audit Committee agenda; • the annual plan is presented to the Audit Committee along with regular progress reports on delivering the annual programme of work, along with identified fraud risks and actions to minimise them; and • case updates are produced for the private session of Audit Committee outlining current cases, their status, and recoveries of money/assets. <p>We did not identify any areas for improvement.</p>

Areas of work	Findings
<ul style="list-style-type: none">the Audit Committee challenging and reviewing counter-fraud work, and ensuring it discharges its duties in relation to counter-fraud.	

Appendix 1

Counter-fraud resources

The following exhibit sets out the number of LCFS resources per 1,000 staff.

Exhibit 3: Number of LCFS resources per 1,000 staff (in order of highest to lowest)

	LCFS WTE	Total number of staff within the organisation	LCFS WTE per 1,000 staff (headcount)
Health Education and Improvement Wales ¹	0.2	280	0.71
Welsh Ambulance Services NHS Trust	2.0	3,535	0.57
Powys Teaching Health Board ²	1.2	2,286	0.52
Cwm Taf Morgannwg University Health Board ²	2.6	11,944	0.22
Hywel Dda University Health Board	2.0	10,032	0.20
Aneurin Bevan University Health Board	2.6	13,659	0.19
NHS Wales (average)	18.2	94,614	0.19
Swansea Bay University Health Board ²	2.2	12,962	0.17
Betsi Cadwaladr University Health Board	2.9	18,491	0.16
Public Health Wales NHS Trust ¹	0.3	1,903	0.16
Velindre University NHS Trust ¹	0.4	4,411	0.16
Cardiff and Vale University Health Board ¹	1.8	15,111	0.12

¹ The Cardiff & Vale University Health Board LCFS Team also provides services to Health Education and Improvement Wales, Public Health Wales NHS Trust and Velindre University NHS Trust via an annual Service Level Agreement.

² The Swansea Bay University Health Board LCFS Team also provides services to Cwm Taf Morgannwg University Health Board and Powys Teaching Health Board via an annual Service Level Agreement.

Source: Counter-Fraud Authority NHS Wales, Operational Performance Report 2019-20 (Quarter 3), and Stats Wales Headcount as at 30 September 2019 (extracted from the NHS Electronic Staff Record system)

Appendix 2

Management response

The following table sets out the Trust's management response to the areas for improvement.

Exhibit 4: the Trust's management response to the areas for improvement

Ref	Area for improvement	Management response	Completion date	Responsible officer
11	Counter-fraud training Implement mandatory counter-fraud training for some or all staff groups.	As part of the Compliance and Competency section within the Health Body's Electronic Staffing Record (ESR) Database, then any such training, which is deemed as being mandatory, has to be agreed and by the Health Body's Workforce Department in conjunction with Staff Side Representation before it can be implemented.	Ongoing with review date of 31 March 2021	Huw George (Finance Director) and Phil Bushby (Director of People and OD)

Ref	Area for improvement	Management response	Completion date	Responsible officer
I2	<p>Counter-fraud staff capacity Consider the Local Counter-Fraud Specialist capacity required to resource required levels of proactive and investigative work, including staff training, and build in resilience to the team.</p>	<p>Based on historical data, the Health Body is confident that the number of days in its current work-plan meets the current requirements. In support of this, regular reviews of the ongoing CF work and resources used are carried out and reported to the A/C. However, should there be an increase in referrals, the need for any additional resource would be discussed with the Finance Director and tabled for approval by the Audit Committee.</p> <p>The Trust's Audit and Corporate Governance Committee discussed the management response to this recommendation in October and was assured that arrangements are in place to provide adequate resources.</p>	31 July 2020	Craig Greenstock (LCFS) and Huw George (Director of Finance)

Ref	Area for improvement	Management response	Completion date	Responsible officer
I3	<p>Clarity of counter-fraud roles and responsibilities</p> <p>Ensure that the Counter-Fraud, Bribery and Corruption Policy sets out counter-fraud roles and responsibilities and the processes and arrangements for undertaking investigations.</p>	<p>The next review of the Policy is set for 14 March 2022 and the updated Policy will be written to clearly set out the individual counter-fraud roles and responsibilities and the processes and arrangements for undertaking investigations.</p>	<p>28 February 2022</p>	<p>Craig Greenstock (LCFS) and Angela Fisher (Deputy Director of Finance)</p>



Audit Wales

24 Cathedral Road

Cardiff CF11 9LJ

Tel: 029 2032 0500

Fax: 029 2032 0600

Textphone: 029 2032 0660

E-mail: info@audit.wales

Website: www.audit.wales

We welcome correspondence and telephone calls in Welsh and English.
Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg a Saesneg.